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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Laura First name I Middle name Sagrati-Jones Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
	mooning man and a doloo.		
2.	All other names you have used in the last 8 years Include your married or maiden names.	Laura Sagrati Laura Jones	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0220	

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Debtor 1 Laura I Sagrati-Jones Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	☐ I have not used any business name or EINs. DBA Care Sourcing, LLC dba Healing Inspirations Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	6000 Bellview Avenue	If Debtor 2 lives at a different address:
		Cincinnati, OH 45242 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Hamilton	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Laura I Sagrati-Jones Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

this bankruptcy petition.

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Deb	otor 1 Laura I Sagrati-Jo	nes			Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Owi	n as a Sole Propriet	tor	
	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.		
	business:	☐ Yes.	Name	e and location of bus	iness	
	A sole proprietorship is a	□ 165.	, tann	y and location of bac		
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numi	per, Street, City, Stat	e & ZIP Code	
	it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? If you are filing under Chapter 11, the court must know whether you are a small business debtor or a d			can set appropriate deadlines. If you indicate that you are a small business debtor or bchapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.			
	For a definition of small	■ No.		Tot Immig arraor Griap		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	,
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.	nd
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and Subchapter V of Chapter 11.	I
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is					
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
					Number, Street, City, State & Zip Code	

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Debtor 1 Laura I Sagrati-Jones

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Dec	Laura I Sagrati-Jo	nes			mber (if known)	
Par	t 6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are ersonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an	
			■ No. Go to line 16b.			
			☐ Yes. Go to line 17.			
				business debts? Business debts are denvestment or through the operation of the		
			☐ No. Go to line 16c.			
			Yes. Go to line 17.			
		16c.	State the type of debts you	u owe that are not consumer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	ter 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and			7. Do you estimate that after any exempt available to distribute to unsecured credit	property is excluded and administrative expenses tors?	
	administrative expenses		■ No			
	are paid that funds will be available for		□Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000	□ 25,001-50,000	
		□ 50-99		<u> </u>	<u> </u>	
		100-19		□ 10,001-25,000	☐ More than100,000	
		200-99	9 			
19.	How much do you estimate your assets to	\$0 - \$5	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion	
			01 - \$500,000 01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$5	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion	
			01 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
		山 \$500,0	01 - \$1 million	— \$100,000,001 \$000 Hillion	— more than goo silien	
Par	t7: Sign Below					
For	you	I have exa	amined this petition, and I d	declare under penalty of perjury that the ir	nformation provided is true and correct.	
				r 7, I am aware that I may proceed, if elig e relief available under each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.	
				d not pay or agree to pay someone who i the notice required by 11 U.S.C. § 342(b		
		I request	request relief in accordance with the chapter of title 11, United States Code, specified in this petition.			
		bankrupto and 3571	y case can result in fines u		ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,	
			a I Sagrati-Jones Sagrati-Jones	Signature of De	ehtor 2	
			of Debtor 1	Signature of Di	55tol 2	
		Executed			MM (DD)XXXX	
			MM / DD / YYYY		MM / DD / YYYY	

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Debtor 1 Laura I Sagrati-Jones Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scott D. Augsback OH	Date	December 15, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Scott D. Augsback OH 0093637 Printed name		
Minnillo & Jenkins Co LPA Firm name		
2712 Observatory Avenue Cincinnati, OH 45208		
Number, Street, City, State & ZIP Code		
Contact phone 513-723-1600	Email address	pjminnillo@minnillojenkins.com
OH 0093637 OH		
Bar number & State		

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		Docume	ent Paye o UI 54	
Fill in this infor	mation to identify your	case:		
Debtor 1	Laura I Sagrati-Jo	ones		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this is

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,882.42
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,882.42
Par	t 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	490,446.07
	Your total liabilities	\$	492,446.07
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,252.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,488.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and	submit this form to

Official Form 106Sum

the court with your other schedules.

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Debtor 1	Laura I Sagrati-Jones	Case number (if known

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$
8.		\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tota	al claim
From Part 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	2,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	126,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	128,000.00

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		Document	Page 10 of 54		
Fill in this inf	formation to identify your case	and this filing:			
Debtor 1	Laura I Sagrati, Ionos				
Depior 1	Laura I Sagrati-Jones First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the: SOI	ITHERN DISTRICT OF O	HIO		
Offica Otatos	Darmapley Countries and	311121411 BIOTITIOT OF	1110	——	
Case number	·				☐ Check if this is an
					amended filing
Ott: -: - 1 □	To man 4.00 A /D				
Official F	Form 106A/B				
Schedi	ule A/B: Proper	tv			12/15
	y, separately list and describe iten		If an asset fits in more than one	e category, list the asset in	
hink it fits best	t. Be as complete and accurate as more space is needed, attach a sep	possible. If two married peo	pple are filing together, both are	equally responsible for su	applying correct
Answer every q	uestion.				
Part 1: Descr	ibe Each Residence, Building, Lan	d, or Other Real Estate You	Own or Have an Interest In		
	, 0,	•			
. Do you own	or have any legal or equitable inte	rest in any residence, buildi	ng, land, or similar property?		
■ No. Go to	Dort 2				
_					
☐ Yes. Whe	ere is the property?				
Part 2: Descr	ibe Your Vehicles				
	lease, or have legal or equitabl				ehicles you own that
someone else	drives. If you lease a vehicle, als	so report it on Schedule G:	Executory Contracts and Un	expired Leases.	
Cars vans	, trucks, tractors, sport utility	vehicles motorcycles			
j. Ga. 5, Ta. 15	,acc,ac.c.c, cpc a				
☐ No					
Yes					
3.1 Make:	Volkswagen	Who has an interest in	the property? Check one	Do not deduct secured cl	
	Tiguan	· _	and property : oneokone	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
Model: Year:	2018	Debtor 1 only		Oreanors who have clar	ins decured by Froperty.
	mate mileage: 23000	☐ Debtor 2 only☐ Debtor 1 and Debtor	0	Current value of the entire property?	Current value of the portion you own?
	nformation:	At least one of the de	•	chare property:	portion you own:
	ble interest - leased	At least one of the de	ediois and another		
	e in husband's name;	☐ Check if this is com	nmunity property	\$0.00	\$0.00
	ind makes payments	(see instructions)	ay proporty		
		1			
	, aircraft, motor homes, ATVs				
Examples: E	Boats, trailers, motors, personal v	vatercraft, fishing vessels,	snowmobiles, motorcycle acc	essories	
■ No					
☐ Yes					
	ollar value of the portion you o				\$0.00
pages you	ı have attached for Part 2. Writ	e that number here		=>	Ψ0.00
	ibe Your Personal and Household				
Do you own	or have any legal or equitable	interest in any of the follo	owing items?		Current value of the
					portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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De	ebtor 1	Laura I Sagr	rati-Jones	Case number	(if known)
6.		old goods and f les: Major appliar	furnishings nces, furniture, linens, china, kitchenware		
		Describe			
			3 couches \$750, 10 chairs \$250, 3 TVs \$ refrigerator \$100, microwave \$15, dinin \$300, bedroom st \$100, dryer \$50, wash	g room \$700, bedroom set	\$2,690.00
7.	Electror Exampl ■ No	les: Televisions a	and radios; audio, video, stereo, and digital equipm Il phones, cameras, media players, games	nent; computers, printers, scanners	s; music collections; electronic devices
		Describe			
			d figurines; paintings, prints, or other artwork; book ions, memorabilia, collectibles	s, pictures, or other art objects; sta	amp, coin, or baseball card collections;
	_	Describe			
			upright piano		\$100.00
			aprigire prime		
	Exampl ■ No	ent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bi	cycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
	Firearr	ns	es, shotguns, ammunition, and related equipment		
	■ No	Describe	s, snotgans, ammuniton, and related equipment		
	Clothe Examp □ No		lothes, furs, leather coats, designer wear, shoes, a	accessories	
	Yes.	Describe			
			wearing apparel		\$1,000.00
12.	□ No [′]		ewelry, costume jewelry, engagement rings, weddi	ng rings, heirloom jewelry, watche	s, gems, gold, silver
			misc. rings & costume jewelry		\$500.00
	Exam _l ■ No	orm animals oles: Dogs, cats,	birds, horses		
		Describe			
	■ No		nd household items you did not already list, inc	luding any health aids you did r	not list
	⊔ Yes.	Give specific inf	iomation		
15			of all of your entries from Part 3, including any number here		sched \$4,290.00

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page 2

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Debtor 1 Laura I Sagrati-Jones Case number (if known) Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... \$100.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Fifth Third Bank 3468 \$428.34 business checking Fifth Third Bank 2738 \$203.19 17.2. checking **Emery Credit Union** \$517.17 17.3. **savings** checking **Emery Credit Union** \$127.79 Wright Patt Cr. Un. \$450.32 savings 17.5. Fifth Third Bank 1889 \$29.46 Checking 17.6. **Business Checking** JP Morgan Chase \$350.00 (HEA Brands) 17.7. **Business Checking** 17.8. (Wholistic Medical) **Huntington Bank** \$170.00 Fifth Third 3704 \$16.15 17.9. Business savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and ioint venture ☐ Yes. Give specific information about them.....

Official Form 106A/B Schedule A/B: Property page 3

% of ownership:

Name of entity:

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De	ebtor 1	Laura I Sagrati-Jones	Case number (if known)	
	Negoti	nment and corporate bonds and other negotiable and n iable instruments include personal checks, cashiers' check egotiable instruments are those you cannot transfer to som	s, promissory notes, and money orders.	
	☐ Yes.	Give specific information about them Issuer name:		
	Examp ■ No	ment or pension accounts bles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift s	savings accounts, or other pension or profit-sharing plans	;
	☐ Yes.	List each account separately. Type of account: Institu	ution name:	
	Your s	ty deposits and prepayments share of all unused deposits you have made so that you ma bles: Agreements with landlords, prepaid rent, public utilities		or others
	☐ Yes.	Institu	ution name or individual:	
23.	Annuit	ies (A contract for a periodic payment of money to you, eith	her for life or for a number of years)	
	☐ Yes	Issuer name and description.		
		ts in an education IRA, in an account in a qualified ABL C. §§ 530(b)(1), 529A(b), and 529(b)(1).	E program, or under a qualified state tuition progran	1.
	Yes	Institution name and description. Separately	file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	, equitable or future interests in property (other than ar	nything listed in line 1), and rights or powers exercisa	able for your benefit
	_	Give specific information about them		
	Examp ■ No	s, copyrights, trademarks, trade secrets, and other inte oles: Internet domain names, websites, proceeds from roya		
	☐ Yes.	Give specific information about them		
27.		ses, franchises, and other general intangibles poles: Building permits, exclusive licenses, cooperative asso	ciation holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific information about them		
М	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax ref ■ No	funds owed to you		
	☐ Yes.	Give specific information about them, including whether yo	ou already filed the returns and the tax years	
		support oles: Past due or lump sum alimony, spousal support, child	support, maintenance, divorce settlement, property settle	ement
	☐ Yes.	Give specific information		
	Examp _	amounts someone owes you oles: Unpaid wages, disability insurance payments, disabilit benefits; unpaid loans you made to someone else	ty benefits, sick pay, vacation pay, workers' compensation	on, Social Security
	■ No	Give specific information		

Case 1:20-bk-13233 Doc 1 Filed 12/16/20 Entered 12/16/20 19:15:08 Page 14 of 54 Document Debtor 1 Laura I Sagrati-Jones Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Lincoln National - term policy - no cash children \$0.00 value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,392.42 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ☐ No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No ☐ Yes. Describe..... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ■ No ☐ Yes. Describe..... 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

Schedule A/B: Property

☐ No

Yes. Describe.....

Official Form 106A/B

massage table, rock warmers, lamps, diffusers, oils, biomat.

page 5

\$1,200.00

Debtor 1	Laura I Sagrati-Jones Case number	(if known)
41. Invent	tory	
■ No		
☐ Yes.	. Describe	
42. Intere	ests in partnerships or joint ventures	
■ No		
☐ Yes.	. Give specific information about them Name of entity: % of ownersh	iip:
43. Custo ■ _{No.}	omer lists, mailing lists, or other compilations	
☐ Do yo	our lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	■ No	
	Yes. Describe	
44 A mu b	succined related respects were did not already list	
44. Any b ☐ No	business-related property you did not already list	
Yes.	s. Give specific information	
	Wholistic Medical, LLC - Debtor is only member Entity owns 5% membership interest in Crooked River Medical	
	Soultions LLC - Crooked River owes judgement debt of \$225,000	+ and
	is believed insolvent. Only other asset is \$170.00	\$0.00
	Only other asset is \$170.00	
	HEA Brands LLC	
	no inventory	00.02
	only asset is scheduled bank account	\$0.00
	Caresourcing LLC	
	debtor is sole member	
	owns the business equipment scheduled as having value of \$1,2	00 \$0.00
	above	
	the dollar value of all of your entries from Part 5, including any entries for pages you have atta	ched \$1,200.00
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. you own or have an interest in farmland, list it in Part 1.	
`	ou own or have any legal or equitable interest in any farm- or commercial fishing-related proper	y?
_	o. Go to Part 7.	
☐ Ye	es. Go to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
Exam	ou have other property of any kind you did not already list? nples: Season tickets, country club membership	
■ No	. Give specific information	
⊔ res.	. Give specific information	
54. Add	the dollar value of all of your entries from Part 7. Write that number here	\$0.00

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Debtor 1	Laura I Sagrati-Jones		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$0.00
56. Part :	2: Total vehicles, line 5	\$0.00		
57. Part	3: Total personal and household items, line 15	\$4,290.00		
58. Part	4: Total financial assets, line 36	\$2,392.42		
59. Part	5: Total business-related property, line 45	\$1,200.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$7,882.42	Copy personal property total	\$7,882.42
63. Total	of all property on Schedule A/B. Add line 55 + line 62			\$7,882.42

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this infor						
Debtor 1	Debtor 1 Laura I Sagrati-Jones					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO			
Case number (if known)					☐ Check if this is an amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Pro	perty You	Claim as	Exempt
---------	----------	---------	-----------	----------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property			Specific laws that allow exemption		
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
2018 Volkswagen Tiguan 23000 miles equitable interest - leased vehicle in	\$0.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
husband's name; husband makes payments Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(2)	
3 couches \$750, 10 chairs \$250, 3	\$2,690.00		\$2,690.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
IVs \$300, 2 DVDs \$25, refrigerator \$100, microwave \$15, dining room \$700, bedroom set \$300, bedroom st \$100, dryer \$50, washer \$100 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(4)(a)	
upright piano Line from Schedule A/B: 8.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line Holli Schedule AVD. 3.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(+)(a)	
wearing apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. §	
LINE HOLL SCHEUUIE A/D. 11.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)	

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tor 1 Laura I Sagrati-Jones	Current volue of the	A	Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
misc. rings & costume jewelry	Schedule A/B \$500.00		\$500.00	Ohio Rev. Code Ann. §
Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(b)
Cash Line from Schedule A/B: 16.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Line nom <i>Schedule AVB</i> . 10.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(3)
business checking: Fifth Third Bank 3468	\$428.34		\$400.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	, ,, ,
business checking: Fifth Third Bank 3468	\$428.34		\$28.34	Ohio Rev. Code Ann. § 2329.66(A)(18)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
checking: Fifth Third Bank 2738 Line from Schedule A/B: 17.2	\$203.19		\$203.19	Ohio Rev. Code Ann. § 2329.66(A)(18)
			100% of fair market value, up to any applicable statutory limit	.,,,,
savings: Emery Credit Union Line from Schedule A/B: 17.3	\$517.17		\$517.17	Ohio Rev. Code Ann. § 2329.66(A)(18)
			100% of fair market value, up to any applicable statutory limit	
checking: Emery Credit Union Line from Schedule A/B: 17.4	\$127.79		\$127.79	Ohio Rev. Code Ann. § 2329.66(A)(18)
			100% of fair market value, up to any applicable statutory limit	
savings: Wright Patt Cr. Un. Line from Schedule A/B: 17.5	\$450.32		\$69.05	Ohio Rev. Code Ann. § 2329.66(A)(18)
			100% of fair market value, up to any applicable statutory limit	
Checking: Fifth Third Bank 1889 Line from Schedule A/B: 17.6	\$29.46		\$29.46	Ohio Rev. Code Ann. § 2329.66(A)(18)
			100% of fair market value, up to any applicable statutory limit	
Business Checking (HEA Brands): JP Morgan Chase	\$350.00		\$350.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
Line from Schedule A/B: 17.7			100% of fair market value, up to any applicable statutory limit	•
massage table, rock warmers, lamps, diffusers, oils, biomat.	\$1,200.00		\$2,550.00	Ohio Rev. Code Ann. § 2329.66(A)(5)
Line from Schedule A/B: 40.1			100% of fair market value, up to any applicable statutory limit	. , ,

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De	btor 1	Laura I Sagrati-Jones	Case number (if known)	
3.		you claiming a homestead exemption of more than \$170,350? ject to adjustment on 4/01/22 and every 3 years after that for cases filed on or	after the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 days	s before you filed this case?	
		□ No		
		☐ Yes		

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Fill in this information to identify your case:					
Debtor 1	Laura I Sagrati-Jo	ones			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO		
Case number					
(if known)					

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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			Document	Page	ZT 01 5	94		
Fi	l in this info	rmation to identify your case:						
De	btor 1	Laura I Sagrati-Jones						
			Middle Name	Last Nam	е			
1 -	ebtor 2	F:	4:1 H N					
(Sp	ouse if, filing)	First Name N	Middle Name	Last Nam	е			
Ur	ited States B	Bankruptcy Court for the: SOUT	THERN DISTRICT OF (OHIO				
Ca	se number							
	nown)						☐ Check	k if this is an
							amen	ded filing
\sim	ficial Fam	400F/F						
		rm 106E/F E/E: Craditors Wha H	lova Unacaura	d Claim	_			12/15
		E/F: Creditors Who H				v ovoditovo with NON	DDIODITY eleime I	
any Sch Sch left. nan	executory co ledule G: Executed Executed Execute D: Cred Attach the Come and case no	entracts or unexpired leases that cou cutory Contracts and Unexpired Lea ditors Who Have Claims Secured by ontinuation Page to this page. If you umber (if known).	uld result in a claim. Also ses (Official Form 106G). Property. If more space i I have no information to r	o list execute . Do not incl s needed, co	ory contract ude any cre opy the Part	s on Schedule A/B: F ditors with partially s you need, fill it out,	Property (Official For secured claims that number the entries	rm 106A/B) and on are listed in in the boxes on the
		All of Your PRIORITY Unsecure						
1.	_ ′	itors have priority unsecured claims	against you?					
	□ No. Go to	Part 2.						
•	Yes.		Ps 1 0	,				
2.	identify what possible, list	our priority unsecured claims. If a cre type of claim it is. If a claim has both p the claims in alphabetical order accord the than one creditor holds a particular of	riority and nonpriority amou	unts, list that If you have r	claim here a	nd show both priority a	and nonpriority amour	nts. As much as
	(For an expla	anation of each type of claim, see the in	nstructions for this form in t	he instruction	booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	Intern	al Revenue Service	Last 4 digits of acco	ount number	0220	\$2,000.00	\$2,000.00	
	•	Creditor's Name						
		ox 7346 delphia, PA 19101-7346	When was the debt	incurred?	12/31/20)18	=	
		Street City State Zip Code	As of the date you f	ile, the claim	is: Check a	II that apply		
	Who incurr	red the debt? Check one.	☐ Contingent					
	Debtor 1	1 only	☐ Unliquidated					
	Debtor 2	2 only	☐ Disputed					
	Debtor 1	1 and Debtor 2 only	Type of PRIORITY u	ınsecured cl	aim:			
	☐ At least	one of the debtors and another	☐ Domestic support	obligations				
	_	if this claim is for a community debt	Taxes and certain	other debts	you owe the	government		
		n subject to offset?	Claims for death of			=		
	■ No		☐ Other. Specify					
	☐ Yes		1	Delinquen	t Taxes -	tax year 2018		_
Pa	rt 2: List	All of Your NONPRIORITY Unse	cured Claims					
3.		itors have nonpriority unsecured cla						
	□ No. You h	nave nothing to report in this part. Subr	nit this form to the court wi	th vour other	schedules			
	Yes.			, ,				
4.	unsecured cla	our nonpriority unsecured claims in tale aim, list the creditor separately for each ditor holds a particular claim, list the other.	h claim. For each claim list	ed, identify w	hat type of cl	laim it is. Do not list cla	aims already included	d in Part 1. If more

Total claim

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Deptor	Laura i Sagrati-Jones		Case number (if known)				
4.1	Edward & Teresa Dieringer	Last 4 digits of account number	0239	\$227,610.55			
	Nonpriority Creditor's Name c/o David Steffensen, Esq. 4873 South State St	When was the debt incurred?	2020				
	Salt Lake City, UT 84107 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify personal g	uarantee - business debt				
4.2	Fed Loan Servicing	Last 4 digits of account number		\$36,000.00			
	Nonpriority Creditor's Name PO Box 60610	When was the debt incurred?					
	Harrisburg, PA 17106 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	,					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐ Yes	Other. Specify					
		student loa	ıns				
4.3	Lending Point LLC Nonpriority Creditor's Name	Last 4 digits of account number	0679	\$7,000.00			
	1201 Roberts Blvd., Suite 200 Kennesaw, GA 30144	When was the debt incurred?	2/2017				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐ Yes ☐ Other. Specify personally guaranteed business loan						

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Laura I Sagrati-Jones	Case number (if known)	
LoanBuilder	Last 4 digits of account number	\$5,800.00
3505 Silverside Rd.	When was the debt incurred? 8/2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify personally guaranteed business loan	
LoanMe	Last 4 digits of account number 0344	\$30,000.00
Nonpriority Creditor's Name PO Box 5645	When was the debt incurred? 9/2018	
Orange, CA 92863	- A. Alla bases the desired and the second	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify personally guaranteed business loan	
Mariemont Center Asswociates	Last 4 digits of account number	\$17,000.00
c/o David Thurner, Agent	When was the debt incurred? 1/8/2020	
Cincinnati, OH 45208 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Contingent	
	·	
	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify business rental deficiency	
	Nonpriority Creditor's Name 3505 Silverside Rd. Wilmington, DE 19810	Nonpriority Circellior's Name 330S Silverside Rd. Wilmington, DE 19810

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Deptor	Laura i Sagrati-Jones	Case number (if known)	
4.7	Mercy Health - Jewish Hospital	Last 4 digits of account number 0100	\$4,528.72
	Nonpriority Creditor's Name PO Box 630804	When was the debt incurred? 2018	
	Cincinnati, OH 45263 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	To or the date you me, the stand to order an that appry	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only		
	_	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify medical services	
4.8	On Deck Capital Inc. Nonpriority Creditor's Name	Last 4 digits of account number	\$28,030.62
	1400 Broadway 25th Fir New York, NY 10018	When was the debt incurred? 11/2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify personally guaranteed business loan	
4.9	On Deck Capital Inc.	Last 4 digits of account number	\$6,000.00
	Nonpriority Creditor's Name		Ψο,οσοίσο
	1400 Broadway 25th Flr New York, NY 10018	When was the debt incurred? 3/2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify personally guaranteed business loan	

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Debtor 1 Laura L Sagrati-Jones Case number (if known)

Sallie Mae	Last 4 digits of account number	\$65 ,
Nonpriority Creditor's Name PO Box 8459	When was the debt incurred?	
Philadelphia, PA 19101 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date year me, the stantille. Oneok an that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	■ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	☐ Other. Specify	
	cosignor on son's student loans	
.		405
Sallie Mae Nonpriority Creditor's Name	Last 4 digits of account number	\$25,
PO Box 8459 Philadelphia, PA 19101	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	■ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	☐ Other. Specify	
— 163	cosignor on daughter's student loans	
	•	
Silco Fire Protection Company	Last 4 digits of account number 3377	
Nonpriority Creditor's Name 10765 Medallion Drive Cincinnati, OH 45241	When was the debt incurred? 2019	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

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Debto	Laura I Sagrati-Jones	Case number (if known)	
4.1	Otan Advance III O		#4.500.00
3	Star Advance, LLC	Last 4 digits of account number	\$4,500.00
	Nonpriority Creditor's Name 8 Summer St., Ste. 2 Kennebunk, ME 04043	When was the debt incurred? 8/2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify personally guaranteed business loan	
4.1	WebBank	Last 4 digits of account number	\$24,000.00
4	Nonpriority Creditor's Name		
	215 South St. Ste 1000	When was the debt incurred? 9/2018	
	Salt Lake City, UT 84111 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify personal guarantee - business loan	
4.1	World Global Capital LLC		\$9,912.50
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ9,912.50
	dba Accel Capital Services LLC 116 Nassau St., Ste. 804	When was the debt incurred? 1/23/19	
	New York, NY 10038 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify personal guarantee - business debt	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Laura I Sagrati-Jones		Case number (if known)			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
CBE Group	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
Payment Processing Ctr. PO Box 2337		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Waterloo, IA 50704					
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
Law Offices of Vadim Serebro, Esq.	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
55 Broadway, 3rd Flr. New York, NY 10006		Part 2: Creditors with Nonpriority Unsecured Claims			
New York, NY 10000	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Max Recovery Group LLC	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
55 Broadway 3rd Flr. New York, NY 10006		Part 2: Creditors with Nonpriority Unsecured Claims			
Ton, Tribuo	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
Zwicker & Associates	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
80 Minuteman Road Andover, MA 01810-1031		Part 2: Creditors with Nonpriority Unsecured Claims			
Aldover, MA 01010 1001	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?			
Zwicker & Associates	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
80 Minuteman Road Andover, MA 01810-1031		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Allacter, MA CICIO-1001	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 2,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 2,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 126,000.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 364,446.07
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 490,446.07

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Fill in this infor	rmation to identify your	case:	
Debtor 1	Laura I Sagrati-Jo	ones	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO
Case number			
(if known)			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Pawnee Leasing Corporation 700 Centre Avenue Fort Collins, CO 80526	business lease - personally guaranteed - signed 12/2017 - expires 12/2020
2.2	Time Payment Corp 16 NE Executive Park #200 Burlington, MA 01803	business lease - personally guaranteed - expires 12/2020

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		Beeamer	1 age 20 01 0-1	
Fill in th	nis information to identify your	case:		
Debtor 1	Laura I Sagrati-Je	ones		
	First Name	Middle Name	Last Name	_
Debtor 2 (Spouse if,		Middle Name	Last Name	_
(Spouse II,	ming) First Name	Middle Name	Last Name	
United S	States Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	_
Cooo nu	um h a r			
Case nu (if known)				☐ Check if this is an
				amended filing
Offici	al Form 106H			
Sche	dule H: Your Cod	ehtors		12/15
Jene	dule II. Tour cou	CDIOIS		12/13
people a ill it out our nan 1. D	are filing together, both are eque, and number the entries in the me and case number (if known) to you have any codebtors? (If	ally responsible for supp boxes on the left. Attach). Answer every question.	the Additional Page to this page. On t	ce is needed, copy the Additional Page,
■ Y	'es			
			operty state or territory? (Community perto Rico, Texas, Washington, and Wisco	
AllZ	ona, Camorna, Idano, Lodisiana	, ricvada, ricw wickies, r de	Sito Moo, Texas, Washington, and Wisco	nioii.)
	lo. Go to line 3.			
ΠY	es. Did your spouse, former spo	use, or legal equivalent live	with you at the time?	
in li For	ne 2 again as a codebtor only i	if that person is a guarant	tor or cosigner. Make sure you have lis	s filing with you. List the person shown sted the creditor on Schedule D (Official alle D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		he creditor to whom you owe the debt hedules that apply:
3.1	Chris Galgoczy		Cabadul	D line
3.1	1248 Bonnie Lane			e D, line
	Cleveland, OH 44124			e E/F, line 4.1
	•		☐ Schedule	e G Teresa Dieringer
			Luwaiu &	reresa Dieriniger
2.2	Crooked River Medical So	alutiona I I C	По	D 1
3.2	/co James Shorey	nutions LLC		e D, line
	2952 Fairmont Blvd			e E/F, line 4.1
	Cleveland, OH 44118		☐ Schedule	
			Edward &	Teresa Dieringer
3.3	debtor's daughter		☐ Schedule	e D, line
	ū			e E/F, line 4.11
			☐ Schedule	
			Sallie Mae	

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Debtor 1	Laura I Sagrati-Jones	Case number (if known)
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	debtor's son	□ Schedule D, line ■ Schedule E/F, line4.10 □ Schedule G Sallie Mae

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- ::::	in this information to identify your o	2250								
	otor 1 Laura I Sag									
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	T OF OHIO							
	se number nown)						mended ppleme	d filing nt showing p s of the follo		
	fficial Form 106I					MM	/ DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. t 1: Describe Employment	ur spouse is not filing wi On the top of any additi	ith you, do not inclu	de inforn	natio	n about yo	ur spoi	use. If more	e space i	is needed,
1.	Fill in your employment information.		Debtor 1			De	ebtor 2	or non-filin	ıg spous	se
	If you have more than one job,	Employment status	■ Employed				l Emplo			
	attach a separate page with information about additional		☐ Not employed				Not em	nployed		
	employers.	Occupation	Massage Thera	pist						
	Include part-time, seasonal, or self-employed work.	Employer's name	Caresourcing, L	LC						
	Occupation may include student or homemaker, if it applies.	Employer's address	3726 Isabella Cincinnati, OH	45209						
		How long employed t	here? 4 mont	hs						
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the ouse unless you are separated.	date you file this form. If	you have nothing to re	eport for a	any li	ine, write \$0) in the s	space. Inclu	de your r	non-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all e	mplo	yers for tha	t persor	on the line	s below.	If you need
						For Debtor	r 1	For Debto		;
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$	43	3.33	\$	N//	<u>A</u>
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	<u>A</u>

Official Form 106I Schedule I: Your Income page 1

Calculate gross Income. Add line 2 + line 3.

433.33

N/A

Deb	tor 1	Laura I Sagrati-Jones	-	(case nu	ımber (<i>if k</i>	nown)				
	0	ur line 4 hours	4			ebtor 1		no	or Debtor on-filing s	spouse	
	Cop	by line 4 here	4.		\$	43	3.33	. \$		N/A	<u>-</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a .	\$		0.00	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b).	\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	. \$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$		0.00	\$ \$		N/A	_
	5g.	Union dues	5g		\$		0.00 0.00	. \$		N/A N/A	_
	5h.	Other deductions. Specify:	-). 1.+	\$		0.00			N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$		0.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ \$		3.33	. \$. \$		N/A	_
			٠.		Ψ	43	3.33	. Ψ.		IN/A	<u>.</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	90		\$		0.00	¢		NI/A	
	8b.	Interest and dividends	8a 8b		\$		0.00 0.00	. \$ \$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$		0.00	\$		N/A	_
	8d.	Unemployment compensation	8d	d.	\$		9.00	\$		N/A	_
	8e.	Social Security	8e	€.	\$		0.00	\$		N/A	_ \
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	\$		N/A	_
	8g.	Pension or retirement income	8g		\$		0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8n	1.+	\$		0.00	+ \$		N/A	<u>. </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5	81	9.00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	1	252.33	+ \$		N/A	= \$	1,252.33
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	٠,	232.33	- T ¥				1,232.33
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe						Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies								\$	1,252.33
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?							Combi month	ned ly income
		Yes Explain:									

Official Form 106l Schedule I: Your Income page 2

	in this informa	tion to identify yo	our cocci			Ī		
Deb	tor 1	Laura I Sagr	ati-Jones	3		Che	eck if this is: An amended filing	
	tor 2						A supplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIC)		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/15
Be info	as complete a ormation. If m nber (if know	and accurate as	possible eded, atta ry questio	If two married people and the control of the contro				
1.	Is this a joir		iloiu					
	■ No. Go to		in a separ	ate household?				
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Del	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's related Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.			-			☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do your exr	enses include	_					☐ Yes
0.	expenses of	f people other t d your depende	han $_{m au}$	No Yes				
Par		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
(Off	ficial Form 10)6I.)					Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	je 4.	\$	0.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.		0.00
				ipkeep expenses		4c.		0.00
5.		owner's associat		dominium dues our residence, such as ho	ime equity loops	4d. 5.		0.00
J.	Auditional	norigage payin	ciilo iui y	our residence, such as no	ine equity loans	ე.	Ψ	0.00

Debtor 1	Laura I Sagrati-Jone	s	Case num	ber (if known)	
6. Uti l	ities:				
6a.	Electricity, heat, natural	gas	6a.	\$	0.00
6b.	Water, sewer, garbage c	collection	6b.	\$	0.00
6c.	Telephone, cell phone, li	nternet, satellite, and cable services	6c.	\$	150.00
6d.	Other. Specify:		6d.	\$	0.00
. Foo	od and housekeeping sup	plies	7.	\$	250.00
. Chi	ldcare and children's edu	cation costs	8.	\$	0.00
. Clo	thing, laundry, and dry cle	eaning	9.	\$	75.00
	sonal care products and	_	10.	\$	75.00
	dical and dental expenses		11.		39.00
	•	maintenance, bus or train fare.		*	
	not include car payments.	namenanes, suc en mann raren	12.	\$	175.00
3. Ent	ertainment, clubs, recreat	tion, newspapers, magazines, and books	13.	\$	100.00
4. Cha	aritable contributions and	religious donations	14.	\$	0.00
5. Ins	urance.	-			
Do	not include insurance dedu	cted from your pay or included in lines 4 or 2	0.		
15a	. Life insurance		15a.	\$	87.00
15b	. Health insurance		15b.	\$	362.00
150	. Vehicle insurance		15c.	\$	0.00
150	. Other insurance. Specify:		15d.	\$	0.00
6. Tax	es. Do not include taxes de	educted from your pay or included in lines 4 of	or 20.		
Spe	ecify:	, , ,	16.	\$	0.00
	tallment or lease payment				
17a	. Car payments for Vehicle	e 1	17a.	\$	0.00
17b	. Car payments for Vehicle	e 2	17b.	\$	0.00
17c	. Other. Specify: stude	ent Ioan	17c.	\$	175.00
	. Other. Specify:		17d.	\$	0.00
8. Yo ı	ir payments of alimony, m	naintenance, and support that you did not	report as		
dec	lucted from your pay on li	ine 5, Schedule I, Your Income (Official Fo	orm 106I). 18.	\$	0.00
9. Oth	er payments you make to	support others who do not live with you.		\$	0.00
	ecify:		19.		
		s not included in lines 4 or 5 of this form o	or on Schedule I: Yo	our Income.	
20a	 Mortgages on other prop 	perty	20a.	\$	0.00
20b	. Real estate taxes		20b.	\$	0.00
200	. Property, homeowner's,	or renter's insurance	20c.	\$	0.00
200	. Maintenance, repair, and	d upkeep expenses	20d.	\$	0.00
20e	. Homeowner's associatio	n or condominium dues	20e.	\$	0.00
1. Oth	er: Specify:		21.	+\$	0.00
	culate your monthly expe	nses			
	. Add lines 4 through 21.			\$	1,488.00
22b	. Copy line 22 (monthly exp	penses for Debtor 2), if any, from Official For	n 106J-2	\$	
220	. Add line 22a and 22b. Th	e result is your monthly expenses.		\$	1,488.00
2 Ccl	oulate vour menthly not in	ncomo			
	culate your monthly net in		00-	¢	4 050 00
		nined monthly income) from Schedule I.	23a.	· -	1,252.33
230	. Copy your monthly expe	nses nom line ZZC above.	23b.	-Ф	1,488.00
220	Subtract your monthly or	vnenses from your monthly income			
230	The result is your monthly ex	kpenses from your monthly income.	23c.	\$	-235.67
	THE TESUIL IS YOUR HIOHUI	ny nociniconne.	200.		
24. Do	vou expect an increase or	r decrease in your expenses within the ye	ar after you file this	form?	
		h paying for your car loan within the year or do you			e or decrease because of a
	lification to the terms of your mo				
	No				
	Yes. Explain here:				

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Fill in this	information to identify your	case:			
Debtor 1	Laura I Sagrati-Jo				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF OHIO		
Case numb	her				
(if known)					☐ Check if this is an amended filing
Decla	Form 106Dec Iration About a ied people are filing together ile this form whenever you fi	, both are equally respo	onsible for supplying co	rrect information.	12/15
obtaining n	money or property by fraud ir oth. 18 U.S.C. §§ 152, 1341, 1	n connection with a ban			
	Sign Below				
Did yo	ou pay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
	No				
_ \	Yes. Name of person				Petition Preparer's Notice, Signature (Official Form 119)
	penalty of perjury, I declare ley are true and correct.	that I have read the sun	nmary and schedules file	ed with this declaration and	
X /s	/ Laura I Sagrati-Jones		X		
La	aura I Sagrati-Jones gnature of Debtor 1		Signature o	f Debtor 2	
Da	December 15, 2020		Date		

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Fill	in this inform	ation to identify you	r case:							
Deb	otor 1	Laura I Sagrati-J	Middle Name	Last Name						
	otor 2 use if, filing)	First Name	Middle Name	Last Name						
Unit	ed States Bar	kruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO						
Case number						Check if this is an amended filing				
Sta Be a	s complete a	of Financial	ble. If two married people		Bankruptcy e equally responsible for su					
). Answer every ques			, p j.					
			rital Status and Where Yo	u Lived Before						
1.	What is your	current marital statu	is?							
	■ Married□ Not married	ried								
2.	During the last 3 years, have you lived anywhere other than where you live now?									
	■ NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pri	or Address:	Dates Debtor	1 Debtor 2 Prior A	Address:	Dates Debtor 2 lived there				
					inity property state or territo Rico, Texas, Washington and					
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors ((Official Form 106H).						
Par	Explain	the Sources of You	r Income							
4.	Fill in the tota	amount of income yo	u received from all jobs and	ing a business during this all businesses, including pa ve together, list it only once		endar years?				
	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	last calendar nuary 1 to De	year: cember 31, 2019)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips					
			Operating a business		☐ Operating a business					

Official Form 107

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Debtor 1 Laura I Sagrati-Jones Case num				e number (if known)				
			Debtor 1			Debtor 2		
				of income I that apply.	Gross income (before deductions and exclusions)	Sources of incom Check all that appl		S
		dar year before December 31,		es, commissions, , tips	\$31,142.00	☐ Wages, commis bonuses, tips	ssions,	
			■ Opera	ating a business		☐ Operating a bus	siness	
	r the calen	dar year: December 31,	☐ Wage 2017) bonuses	es, commissions, , tips	\$0.00	☐ Wages, commis bonuses, tips	esions,	
			■ Opera	ating a business		☐ Operating a bus	siness	
	and other winnings. List each s	public benefit pa If you are filing a	ayments; pensions; a joint case and you gross income from e	rental income; intere have income that y		cted from lawsuits; roy only once under Debto		
			Debtor 1			Debtor 2		
				of income	Gross income from each source (before deductions and exclusions)	Sources of incom Describe below.	e Gross income (before deductions and exclusions)	S
Pa	rt 3: List	t Certain Payme	ents You Made Bef	ore You Filed for E	3ankruptcy			
6.	Are either	r Debtor 1's or	Debtor 2's debts p	rimarily consumer	debts?			
	■ No.			as primarily consu family, or household		ts are defined in 11 U.S	S.C. § 101(8) as "incurred by a	an
		■ No. Go	to line 7.		d you pay any creditor a tota			
		pa no	id that creditor. Do to include payments	not include paymen to an attorney for th		gations, such as child	nts and the total amount you support and alimony. Also, do ljustment.	
	☐ Yes.			ve primarily consult for bankruptcy, did	mer debts. I you pay any creditor a tota	al of \$600 or more?		
			to line 7.					
		ind		domestic support ob	d a total of \$600 or more an oligations, such as child sup		paid that creditor. Do not b, do not include payments to a	an

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Case number (if known)

7.	Within 1 year before you filed for bankrupto <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen- control, or owner of 20% of	eral partners; partner r more of their voting	erships of which g securities; and	nyou are a genera d any managing a	al partner; corporations gent, including one for	
	■ No						
	☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still own		this payment	
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos		ments or transfer a	any property o	n account of a de	ebt that benefited an	
	-						
	No						
	Yes. List all payments to an insider	Dates of normant	Total amount	A	Dansan fan	4b:aa	
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still own		this payment itor's name	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.						
	□ No						
	Yes. Fill in the details.						
	Case title Case number	Nature of the case	Supreme Court of the State of New York County of Monroe		Status of th	Status of the case	
	World Global Capital LLC dba Accel Capital Services LLC E2019004157	Civil			☐ On appe	□ Pending□ On appeal■ Concluded	
	On Deck Capital Inc. v. Sagrati A2000415	Civil	Hamilton Coun Pleas 1000 Main Stre Cincinnati, OH	et	■ Pending □ On appe □ Conclude		
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, f	oreclosed, gar	nished, attached	I, seized, or levied?	
	□ No. Go to line 11.						
	Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Da	ate	Value of the	
	Crouncer realing una read occ					property	
	World Global Capital LLC	Explain what happened		e l'	2010	¢2 500 00	
	dba Accel Capital Services LLC 116 Nassau St., Ste. 804 New York, NY 10038	☐ Property was reposse	business bank account 6/2019 \$3,500.00 □ Property was repossessed. □ Property was foreclosed. □ Property was granished.				
		☐ Property was attached					

Debtor 1 Laura I Sagrati-Jones

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Case number (if known)

11.	Within 90 days before you filed for bankry accounts or refuse to make a payment be No ☐ Yes. Fill in the details.		did any creditor, including a bank or financial in you owed a debt?	stitution, set off any a	mounts from your
	Creditor Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes		as any of your property in the possession of an a er official?	assignee for the bene	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions	3			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600		did you give any gifts with a total value of more t Describe the gifts	han \$600 per person ⁴ Dates you gave	? Value
	per person Person to Whom You Gave the Gift and Address:		J. 100 1110 g. 110	the gifts	
14.			did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	otcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ No □ Yes. Fill in the details.				
	how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending acc claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or p	reparir	d you or anyone else acting on your behalf pay on a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Minnillo & Jenkins Co. LPA 2712 Observatory Ave. Cincinnati, OH 45208		attorney fees \$1,200	9/2019 - 6/2020	\$1,200.00

Debtor 1 Laura I Sagrati-Jones

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Debtor 1 Laura I Sagrati-Jones

Case number (if known)

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you l	or to make payments			or transfer any proper	ty to anyone who
	■ No Yes. Fill in the details.					
	Person Who Was Paid	Description and va	alue of any prop	pertv	Date payment	Amount of
	Address	transferred	, ,		or transfer was made	payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus	siness or financial affa	irs?	, ,		,
	Include both outright transfers and transfers mad include gifts and transfers that you have already			security intere	est or mortgage on your	property). Do not
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and value of property transferred payments received or debts paid in exchange			Date transfer was made	
	Person's relationship to you			paid in e	xcnange	
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protes		y property to a s	self-settled t	rust or similar device o	of which you are a
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and va	alue of the prop	erty transfe	rred	Date Transfer was made
Par	8: List of Certain Financial Accounts, Insti	ruments Safe Denosit	Boyes and Sto	rana Unite		
20.	Within 1 year before you filed for bankruptcy,	•	,		in your name, or for yo	our benefit, closed,
	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa No				shares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
		Last 4 digits of account number	Type of accour	c	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, an	y safe depos	sit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acconding to Address (Number, State and ZIP Code)		Describe the	e contents	Do you still have it?
22.	Have you stored property in a storage unit or	,	home within 1 y	year before y	ou filed for bankruptc	y?
	■ No	-	•	-	•	
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St		Describe the	contents	Do you still have it?
		State and ZIP Code)				

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Debtor 1 Laura I Sagrati-Jones

Case number (if known)

Par	rt 9: Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someone for someone.	ne else owns? Include any proper	ty you borrowed from, are storing fo	r, or hold in trust			
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	rt 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions a	apply:					
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, ground	- ·				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal s	-	law, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an environr hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	n they occurred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	rt 11: Give Details About Your Business or Conn	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have ar	ny of the following connections to an	y business?			
	☐ A sole proprietor or self-employed in a to	rade, profession, or other activity,	either full-time or part-time				
	■ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing executi	ive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation						

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Debtor 1 Laura I Sagrati-Jones

Case number (if known)

□ No. None of the above applies. Go to Part 12.					
Yes. Check all that apply above and fill in the details below for each business.					
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed			
HEA Brands LLC	sales - medicinal oils 50% owner with Angela Rozzi Burns only asset - checking acct. \$400 no debts	EIN: 83-1870254 From-To 11/2018 - current			
Wholistic Medical	health clinic - not for profit assets \$400.00 in checking no debts	EIN: From-To 11/2017 - current			
Caresourcing LLC dba Healing Inspirations Center 9452 Towne Sq. Ave. Blue Ash, OH 45242	massage therapy	EIN: From-To 2/2013 to present			
Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.					
■ No □ Yes. Fill in the details below.					
Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

28.

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Case number (if known) Debtor 1 Laura I Sagrati-Jones Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Laura I Sagrati-Jones Signature of Debtor 2 Laura I Sagrati-Jones Signature of Debtor 1 Date Date December 15, 2020 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Ohio

In	re Laura I Sagrati-Jones	O 2 202 200 01 0 220	Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR DI	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filibe rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept			1,200.00
	Prior to the filing of this statement I have received		\$	1,200.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person t	inless they are mem	bers and associates of my law firm
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to r	render legal service for all aspects	of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Exemption planning; 	tement of affairs and plan which	may be required;	
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.	ee does not include the following ischargeability actions, judio	service: ial lien avoidanc	es, relief from stay actions or
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of arbankruptcy proceeding.	ny agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in
_	December 15, 2020	/s/ Scott D. Augsb		
	Date	Scott D. Augsbac Signature of Attorne Minnillo & Jenkins 2712 Observatory	s Co LPA	
		Cincinnati, OH 45 513-723-1600 Fax pjminnillo@minni	208 c: 513-723-1620	
		Name of law firm		

=:::							
	formation to identify your case:			eck one box only :A-1Supp:	as direct	ted in this form and	in Form
Debtor 1	Laura I Sagrati-Jones		_	л тоарр.			
Debtor 2 (Spouse, if filing)			_ •	1. There is no	presump	otion of abuse	
	es Bankruptcy Court for the: Southern District	of Ohio	_	applies wil	l be made	etermine if a presur e under <i>Chapter 7 i</i> Form 122A-2).	•
Case numbe	er		_	☐ 3. The Means	Test doe	es not apply now be rvice but it could ap	
				☐ Check if this	s is an aı	mended filing	
Official	Form 122A - 1					•	
Chapte	r 7 Statement of Your Cu	rrent Mont	hly Inc	ome			04/20
attach a separ case number (qualifying mili	te and accurate as possible. If two married people rate sheet to this form. Include the line number to (if known). If you believe that you are exempted fritary service, complete and file Statement of Exemt Calculate Your Current Monthly Income	which the additional om a presumption of	information a abuse because	pplies. On the top se you do not hav	p of any ac	dditional pages, writ ly consumer debts o	te your name and or because of
1. What is	s your marital and filing status? Check one of						
	married. Fill out Column A, lines 2-11.	,.					
	ried and your spouse is filing with you. Fill o	out both Columns A	and B, lines	2-11.			
■ Mar	ried and your spouse is NOT filing with you	. You and your spo	ouse are:				
	iving in the same household and are not leg	ally separated. Fill	out both Col	umns A and B, I	ines 2-11		
■ Li	iving separately or are legally separated. Fill be penalty of perjury that you and your spouse are iving apart for reasons that do not include evad	out Column A, lines legally separated u	s 2-11; do no nder nonbanl	t fill out Column cruptcy law that	B. By che	ecking this box, you r that you and your	
101(10A). If the 6 month	average monthly income that you received from all For example, if you are filing on September 15, the 6-hs, add the income for all 6 months and divide the tota wn the same rental property, put the income from that	month period would be al by 6. Fill in the result	March 1 throu t. Do not includ	gh August 31. If the eany income amo	ne amount ount ount more t	of your monthly incom than once. For examp	ne varied during ble, if both
				Column A Debtor 1	D	olumn B ebtor 2 or on-filing spouse	
_	ross wages, salary, tips, bonuses, overtime deductions).	, and commissions	s (before all	\$ 289.	.15 \$		
	ny and maintenance payments. Do not includen B is filled in.	e payments from a s	spouse if	\$0	.00 \$		
of you from ar and roo	ounts from any source which are regularly por your dependents, including child support unmarried partner, members of your househout mates. Include regular contributions from a solution on the contribution on the solution of the solution o	 t. Include regular coll ld, your dependents 	ontributions s, parents,	\$0	.00 \$		
5. Net inc	come from operating a business, profession	•					
•		Debtor \$ 0.00	r 1				
	receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	ry and necessary operating expenses onthly income from a business, profession, or fa	0.00	opy here ->	\$ 0.	.00 \$		
	come from rental and other real property	····· Ψ			·		
		Debto	r 1				
Gross r	receipts (before all deductions)	\$ 0.00					
	ry and necessary operating expenses	-\$ 0.00		_	00 6		
Net mo	onthly income from rental or other real property	\$ <u>0.00</u> C	opy here ->		.00 \$		
7 Interes	t dividends and royalties			\$ 0.	.00 \$		

Official Form 122A-1

7. Interest, dividends, and royalties

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Laura I Sagrati-Jones Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 289.15 289.15 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 289.15 Multiply by 12 (the number of months in a year) **x** 12 3,469.80 12b. The result is your annual income for this part of the form 12h 13. Calculate the median family income that applies to you. Follow these steps: OH Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 51,776.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14a. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here. I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Laura I Sagrati-Jones Laura I Sagrati-Jones

Official Form 122A-1

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Debtor 1	Laura I Sagrati-Jones	Case number (if known)	
	Signature of Debtor 1		
Da	te December 15, 2020		
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this for	m.	

Debtor 1 Laura I Sagrati-Jones

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2020 to 11/30/2020.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Enagic

Income by Month:

6 Months Ago:	06/2020	\$0.00
5 Months Ago:	07/2020	\$0.00
4 Months Ago:	08/2020	\$0.00
3 Months Ago:	09/2020	\$0.00
2 Months Ago:	10/2020	\$0.00
Last Month:	11/2020	\$870.00
	Average per month:	\$145.00

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Juice Plus

Income by Month:

6 Months Ago:	06/2020	\$0.00
5 Months Ago:	07/2020	\$0.00
4 Months Ago:	08/2020	\$0.00
3 Months Ago:	09/2020	\$39.88
2 Months Ago:	10/2020	\$0.00
Last Month:	11/2020	\$0.00
	Average per month:	\$6.65

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Massage

Income by Month:

6 Months Ago:	06/2020	\$0.00
5 Months Ago:	07/2020	\$0.00
4 Months Ago:	08/2020	\$150.00
3 Months Ago:	09/2020	\$105.00
2 Months Ago:	10/2020	\$400.00
Last Month:	11/2020	\$170.00
	Average per month:	\$137.50

Line 8 ssa - Unemployment compensation (Non-CMI)

Source of Income: unemployment

Income by Month:

6 Months Ago:	06/2020	\$3,419.00
5 Months Ago:	07/2020	\$3,419.00
4 Months Ago:	08/2020	\$3,419.00
3 Months Ago:	09/2020	\$3,419.00
2 Months Ago:	10/2020	\$3,419.00
Last Month:	11/2020	\$819.00
	Average per month:	\$2,985.67

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. CBE Group
Payment Processing Ctr.
PO Box 2337
Waterloo, IA 50704

Chris Galgoczy 1248 Bonnie Lane Cleveland, OH 44124

Crooked River Medical Solutions LLC /co James Shorey 2952 Fairmont Blvd Cleveland, OH 44118

Edward & Teresa Dieringer c/o David Steffensen, Esq. 4873 South State St Salt Lake City, UT 84107

Fed Loan Servicing PO Box 60610 Harrisburg, PA 17106

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Law Offices of Vadim Serebro, Esq. 55 Broadway, 3rd Flr. New York, NY 10006

Lending Point LLC 1201 Roberts Blvd., Suite 200 Kennesaw, GA 30144

LoanBuilder 3505 Silverside Rd. Wilmington, DE 19810

LoanMe PO Box 5645 Orange, CA 92863

Mariemont Center Asswociates c/o David Thurner, Agent 2324 Madison Rd., Ste. 2 Cincinnati, OH 45208

Max Recovery Group LLC 55 Broadway 3rd Flr. New York, NY 10006

Mercy Health - Jewish Hospital PO Box 630804 Cincinnati, OH 45263 On Deck Capital Inc. 1400 Broadway 25th Flr New York, NY 10018

Pawnee Leasing Corporation 700 Centre Avenue Fort Collins, CO 80526

Sallie Mae PO Box 8459 Philadelphia, PA 19101

Silco Fire Protection Company 10765 Medallion Drive Cincinnati, OH 45241

Star Advance, LLC 8 Summer St., Ste. 2 Kennebunk, ME 04043

Time Payment Corp 16 NE Executive Park #200 Burlington, MA 01803

WebBank 215 South St. Ste 1000 Salt Lake City, UT 84111

World Global Capital LLC dba Accel Capital Services LLC 116 Nassau St., Ste. 804 New York, NY 10038

Zwicker & Associates 80 Minuteman Road Andover, MA 01810-1031